

GlassCraft Warranty Claim Form June 2011

Copy this form, and fax to:
713-690-2919

2002 Brittmoore Road • Houston, TX 77043
Local: 713-690-8282 National: 800-766-2196
www.glasscraft.com

Company Name: _____

Address: _____

City, State, Zip: _____

Contact Name: _____ Telephone: _____

Email: _____ PO Number: _____

Invoice Number: _____ Homeowner: _____

Address where the product is installed: _____

Please describe in detail the nature of the claim: _____

Date of Installation: _____ Date Door Finished: _____

Exact Install Door Slab Size: _____ Height: _____ Width: _____

Date shipment received from GlassCraft: _____

Was door or entryway factory finish or field-finished? Factory Finished Field Finished

In field finish

Type or brand of finish applied used: _____ Number of coat of finish applied: _____

Was finish applied to edges, top and bottom edge of door?

Edges: Yes No Top: Yes No Bottom: Yes No

Has the door had maintenance and/or refinished? Yes No Maintenance/Refinish Dates: _____

Description of maintenance/refinish: _____

Overhang

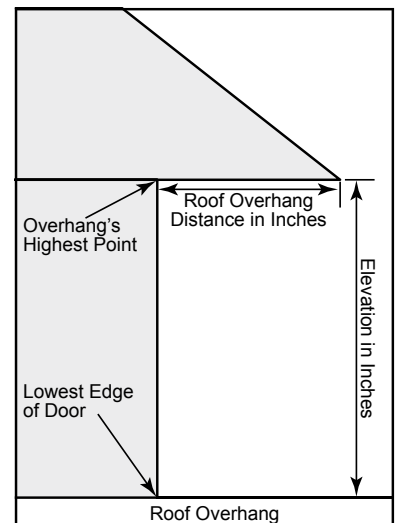
Roof Overhang Distance in Inches: _____

Elevation in Inches: _____

Other Required Information

GlassCraft requires digital photos in order to process warranty claims. When submitting your warranty claim request please supply a picture of the elevation and at least one picture showing the defect. This help speed up the processing of your claim. All other claims do not require photos. Please email this Warranty Form to warranty@glasscraft.com.

Use the box below for additional comments: _____



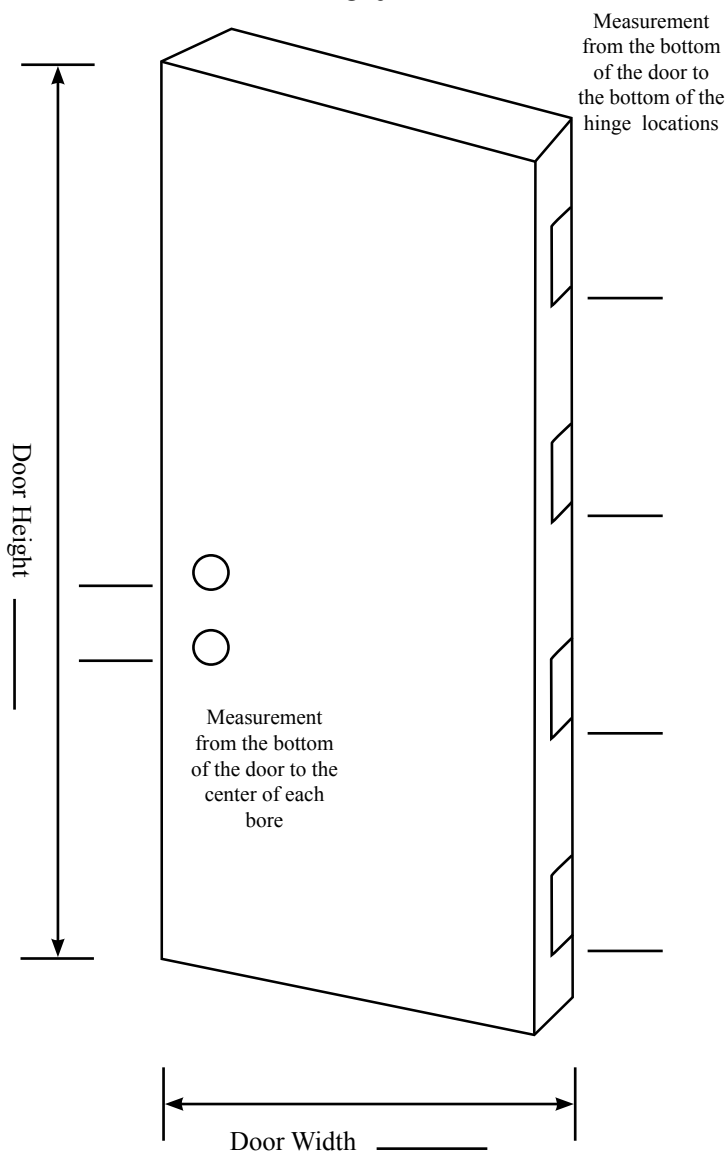
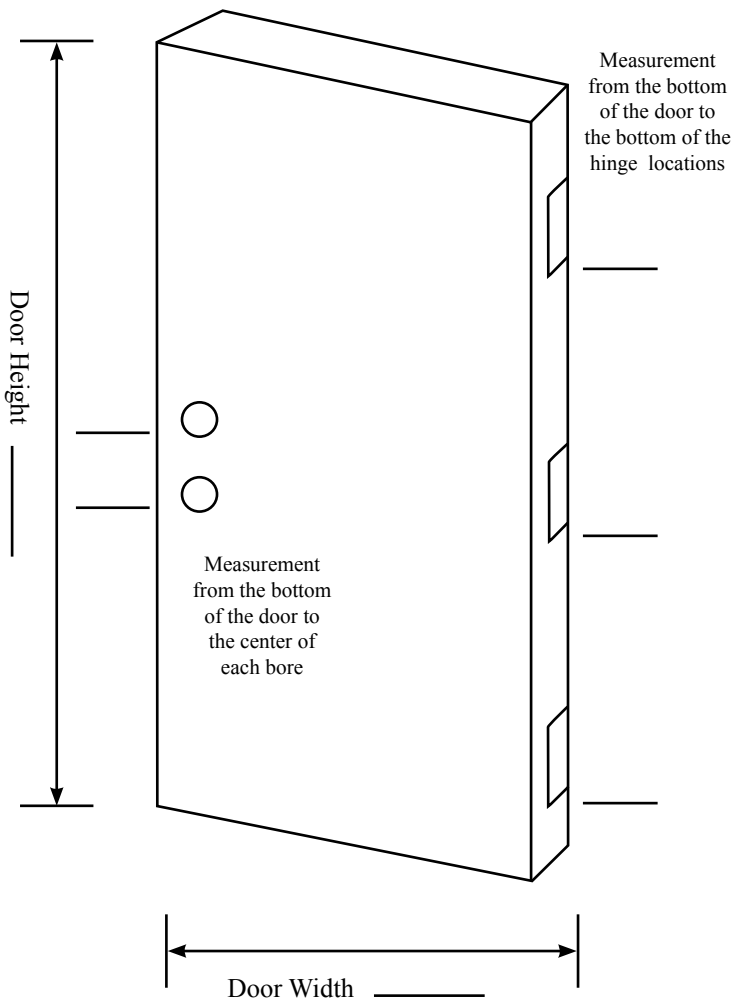
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6'8"

8'0"



Hinge Side Bevel: Yes No Angle _____

Lock Side Bevel: Yes No Angle _____

For arch or round top doors; measurement from the bottom of the door.

Spring Line _____